| l   |  |  |  | AP!                         | piicatio                | u or f                          | Jocket Mit     | uper .             |          |              |      |  |                 |  |  |
|---|--|--|--|-----------------------------|-------------------------|---------------------------------|----------------|--------------------|----------|--------------|------|--|-----------------|--|--|
| PATENT APPLICATION FEE DETERMINATION RECO<br>Effective October 1, 2003  |  |  |  |                             |                         |                                 |                |                    | 10473447 |              |      |  |                 |  |  |
| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |  |  |  |                             |                         |                                 |                | SMALL ENTITY TYPE  |          |              |      | OTHER THAN<br>OR SMALL ENTITY                    |                 |  |  |
| 7   | OTAL CLAIMS                                    | S  | 1 /5   | 176                         |                         |                                 |                | RATE               |          | FEE          | 7    | RATE   | FEE             |  |  |
| F   | OR   |  | NUMBE  | NUMBER FILED                |                         | NUMBER EXTRA                    |                | BASIC F            | EE :     | 385.00       | OR   | BASIC FEE  | 770.00          |  |  |
| TOTAL CHARGEABLE CLAIMS   |  |  | 176  | /76minus 20=                |                         | . 156                           |                | XS 9=              |          |              | OR   | ¥240   | 240             |  |  |
| IN  | DEPENDENT (                                    | CLAIMS   | 7-   | 7 minus 3 =                 |                         | $\mathcal{H}$                   |                | X43=               |          |              |      | X86=   | 7 411           |  |  |
| M   | ULTIPLE DEPE                                   | NDENT CLAIM  | PRESENT  | <del>-</del> .              |                         |                                 |                |                    | +        |              | POR  | <del>                                     </del> | 279             |  |  |
| */If the difference ip column 1 is less than zero, enter *0" in column 2  |  |  |  |                             |                         |                                 | '              | +145=              | 4        |              | OR   | +290=  | 2.2.11          |  |  |
| CLAIMS AS AMENDED - PART II   |  |  |  |                             |                         |                                 |                | TOTAL              | ·L       |              | OR   | TOTAL  | 392             |  |  |
| //  |  |  | SMALI  | L EN                        | ITITY                   | OR                              | OTHER<br>SMALL |                    |          |              |      |  |                 |  |  |
| AMENDMENT A   | T /  | (Column 1) CLAIMS REMAINING                          | 1  | (Colur                      | EST                     | (Column 3)                      | Ίi             |                    | _        | ADDI-        | 7    |  | ADDI-           |  |  |
|   |  | AFTER<br>AMENDMENT                                   |  | PREVIO                      | USLY                    | PRESENT<br>EXTRA                |                | RATE               | 1        | IONAL<br>FEE |      | RATE   | TIONAL<br>FEE   |  |  |
|   | Total  | -21  | Minus  | -/-                         | 76                      | =                               | lt             | X\$ 9=             | T        | /            | OR   | X\$18=   | /               |  |  |
| Z.  | Independent                                    | . 7  | Minus  |                             | >                       |                                 | lt             | X43=               | ╁        | /-           |      | XB6=   | /               |  |  |
| ۲   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |  |                             |                         |                                 | <b> </b>       |                    | 1        |              | OR   |  |                 |  |  |
|   |  |  |  |                             |                         |                                 | L              | +145=              | 1        |              | OR   | +290=  |                 |  |  |
|   | Jan 1-1  |  |  |                             |                         |                                 | <b>A</b>       | TOTAL<br>DDIT. FEI |          |              | OR , | ADDIT. FEE                                       | -               |  |  |
| ᆛ   | 11770  | Column 1)  |  | (Colum                      | _                       | (Column 3)                      |                | ····               |          |              |      |  |                 |  |  |
| AMENOMENT B   |  | REMAINING<br>AFTER                                   |  | NUMB<br>PREVIO              | ER                      | PRESENT<br>EXTRA                |                | RATE               |          | DDI-<br>ONAL |      | RATE.  | ADDI-<br>TIONAL |  |  |
|   |  | AMENDMENT  | <del>                                     </del> | PAIDF                       |                         | -                               | -              |                    | ╀╌       | FEE          |      | -  | FEE             |  |  |
|   | Total  | 17   | Minus  | - 1                         | φ_                      | =                               | L              | X\$ 9=             | Ŀ        |              | OR   | X\$18=   |                 |  |  |
| A   | Independent                                    | Independent • Minus FIRST PRESENTATION OF MULTIPLE D |  |                             | C1 ANA                  |                                 |                | X43=               |          |              | OR   | X86=   |                 |  |  |
|   | 11/10/1/1/202                                  | NATION OF MIC  | DETIFIED DE                                      | THE DEI CHOCKY              |                         |                                 |                | +145=              |          |              | OR   | +290=  |                 |  |  |
|   |  |  |  |                             |                         |                                 |                |                    | 1        |              | OR.  | TOTAL  |                 |  |  |
|   | •  | (Column 3)   | AL   | DOIT. FEE                   |                         |                                 | ·              | DOTT. FEEL         | · -      |              |      |  |                 |  |  |
| ပ   | •  | (Column 1)  CLAIMS  REMAINING                        |  | (Colum<br>HIGHE<br>NUMB     | \$7                     | PRESENT                         | F              |                    | AI       | DDI-         | Γ    |  | ADDI-           |  |  |
| Į,  |  | AFTER<br>AMENDMENT                                   |  | PREVIOU<br>PAID FI          | JSLY                    | EXTRA                           |                | RATE               |          | NAL<br>EE    |      | RATE   | TIONAL          |  |  |
| AMENDMENT   | Total  | •  | Minus  | •                           |                         |                                 |                | X\$ 9=             | 广        |              | OR   | X\$18=   | _FEE            |  |  |
| ME  | Independent                                    | •  | Minus  | ***                         |                         | •                               | -              |                    | ┢        | -1           |      |  |                 |  |  |
| ۷   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |  |                             |                         |                                 | -              | X43=               | $\vdash$ | <b>—</b>  '  | OR   | X86=   |                 |  |  |
|   | lithen makes to seek to                        | Ŀ  | +145=  | L                           |                         | DR                              | +290=          |                    |          |              |      |  |                 |  |  |
| If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE  OR  ADDIT. FEE  OR  ADDIT. FEE |  |  |  |                             |                         |                                 |                |                    |          |              |      |  |                 |  |  |
| . 1   | i me "Highest Nun<br>The "Highest Nun          | MDer Previously Paid<br>ber Previously Paid          | so mar IN THI<br>Por" (Total or                  | S SPACE is !<br>Independent | ess than<br>1) is the I | 3, enter "3."<br>highest number |                |                    | propri   | iate bax (   |      |  |                 |  |  |